PREREQUISITE/COREQUISITE CHALLENGE FORM

NAME: ___________________________  GAVILAN ID# G00
ADDRESS: ___________________________  PHONE# __________
CITY: ___________________________  EMAIL ___________________________
STATE: __________  ZIP __________

Student may register for desired course, pending final outcome of this Challenge Petition, after s/he:
1) Fills out this Prerequisite/Corequisite Challenge form.
2) Attaches a written statement and documentation supporting the reason or basis for the challenge.
3) Submits this form with all attachments by the published deadlines to the Admissions & Records Office.

- COURSE I WISH TO ENROLL IN: ___________________________  SEMESTER/YR ___________________________
  (i.e. Fall/2013)  □ N/A
- REFERRED BY: ___________________________
- PREREQUISITE, COREQUISITE OR COURSE REQUIREMENTS I WISH TO CHALLENGE: ___________________________

- GROUNDS FOR CHALLENGE: (check one or more boxes)
  □ 1. The prerequisite course has not been made reasonably available
  □ 2. The prerequisite was established in violation of regulation or in violation of the District-approved processes (student must document)
  □ 3. I challenge the prerequisite on the grounds that it is discriminatory or is applied in a discriminatory manner (student must document)
  □ 4. I challenge the prerequisite based on my knowledge or ability to succeed in the course despite not meeting the prerequisite (student must document knowledge and/or ability)

I acknowledge that Gavilan College has determined that this prerequisite is necessary for success in the course and that I am taking personal responsibility for succeeding without this prerequisite.

_____________________________  ___________________________
STUDENT SIGNATURE  DATE

COLLEGE USE ONLY

Review and Evaluation
  □ Documentation

Date filed with the A&R Office: ___________________________  Received By: ___________________________
Challenge form referred to: ___________________________

_____________________________  ___________________________  ___________________________
DEPARTMENT CHAIR (PRINT NAME)  DEPARTMENT CHAIR SIGNATURE  DATE

_____________________________  ___________________________  ___________________________
DIVISION DEAN (PRINT NAME)  DEAN/ADM SIGNATURE  DATE

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